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CONFIRMATION NO. 6444

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/593,260	07/02/2007 RULE	600	3735	DK-US065241

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**** CONTINUING DATA *******

This application is a 371 of PCT/JP05/04991 03/18/2005

**** FOREIGN APPLICATIONS *******

JAPAN 2004-080627 03/19/2004

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

08/30/2007

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		JAPAN	6	34	6
Verified and Acknowledged Examiner's Signature	/CATHERINE E BURK/ Examiner's Signature	Initials				

ADDRESS

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TITLE

Biological Rhythm Adjustment Method, Biological Rhythm Adjustment Device, Biological Rhythm Adjustment System

FILING FEE RECEIVED 3590	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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